U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE

DECLARATION ATTORNEY'S DOCKET NO. 12985/3

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled PROCESS FOR THE CONTINUOUS RECOVERY OF FREE TARTARIC ACID FROM RAW MATERIALS CONTAINING POTASSIUM HYDROGENTARTRATE, the specification of which is being filed herewith.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

PRIOR FOREIGN APPLICATION(S)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION	DATE OF FILING	DATE OF ISSUE
	NUMBER	(day, month, year)	(day, month, year)
Germany	103 08 045.7	26 February 2003	

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

Patrick J. Birde KENYON & KENYON One Broadway New York, New York 10004 (212) 425-7200 (phone) (212) 425-5288 (facsimile)

CUSTOMER NUMBER 26646

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME FIRST GIVEN NAME		NAME	SECOND GIVEN NAME
	STEIN	Dieter		
RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	Wiesbaden	Germany		Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS	СІТУ		STATE & ZIP CODE/COUNTRY
	Am Kirchgarten 9	Wiesbaden 65191		Germany
Signature			Date	
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME
	BONSCH	Rudolf		
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	Mainz	Germany		Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS	СПУ		STATE & ZIP CODE/COUNTRY
	Tuchbleiche 3	Mainz 55130		Germany
Signature			Date	

FULL NAME OF	FAMILY NAME	FIRST GIVEN	NAME	SECOND GIVEN NAME
INVENTOR	ERB	Klaus		
RESIDENCE & CITIZENSHIP	CITY		OREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	Goslar	Germany	<i>'</i>	Germany
POST OFFICE ADDRESS	POST OFFICE ADDRESS	СПУ		STATE & ZIP CODE/COUNTRY
	Hainholz 10	Goslar 3	8640	Germany
Signature			Date	
<u> </u>			<u></u>	<u> </u>